## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.	42P15881	
First Inventor   Thom	nas J. Holman	
Title A METHOD, SY	STEM, AND APPARATUS FOR ADJ	ACENT-SYMBOL
Every and Mail Cabal Ma	EVIDACEAGAINA	

(Only for new nonprovisional applications under 37 CFR 1.53(b))

		117323	32737 108	
APPLIC	CATION ELEMENTS		Mail Slop Patent Application Commissioner for Patents	
See MPEP chapter 600 co	ncerning utility patent application contents	ADDRESS TO:	P.O. Box 1450 Alexandria, VA 22313-145	
1. Fee Transmittal F	orm (e.g., PTO/SB/17)	7. CD-ROM or C	D-R in duplicate, large table	
	a duplicate for fee processing)		gram ( <i>Appendix</i> )	L A
2. Applicant claims s See 37 CFR 1.27	small entity status.		or Amino Acid Sequence Il of the following are nec	
- Descriptive title c - Cross Reference - Statement Regar - Reference to seq or a computer pro - Description - De	s to Related Applications ding Fed sponsored R & D Juence listing, a table, ogram listing appendix	b. Specificatio i. ☐ CD- ii. ☐ pape	uter Readable Form (CR n Sequence Listing on: ROM or CD-R (2 copies er nents verifying identity of	); or 12/01/62
<ul> <li>Background of the Brief Summary or</li> </ul>		<b>,</b>		
- Brief Description - Detailed Descript - Claim(s) - Abstract of the D  4. Drawing(s) (35 U) 5. Oath or Declaration	of the Drawings ( <i>if filed</i> ) tion	10. ☐ 37 C.F.R. § 3. (when there is 11. ☐ English Transl 12. ☐ Information Di Statement (ID 13. ☐ Preliminary Al	an assignee) ation Document (if applicate sclosure S)/PTO-1449	Power of Attorney
			of Priority Document(s)	
(for continuation/divisional with Box 18 completed) (if foreign priority is claimed)				400 (E)(0)(D)(i)
Signe name 1.63(c	ETION OF INVENTOR(S) d statement attached deleting inventor(s) d in the prior application, see 37 CFR d)(2) and 1.33(b). Sheet. See 37 CFR 1.76		t attach form PTO/SB/35 or	
O	Sheet. See 37 GFK 1.70			
	PLICATION, check appropriate box, and	upply the requisite infor	mation below and in a preli	minary amendment,
or in an Application Data S		and (CID) of n	rior application No:	
Continuation	☐ Divisional ☐ Continuation-in-	ian (CIP) Or p		
Prior application Infor	·	<del></del>	Group/Art Unit:	
part of the disclosure of the acco	NAL APPS only: The entire disclosure of the prior a ompanying continuation or divisional application a omitted from the submitted application parts.			
	18. CORRESP	ONDENCE ADDRESS		
☑ Customer Number o	or Bar Code Label	791	or Correspo	ndence address below
Name				
Address			· · · · · · · · · · · · · · · · · · ·	
City	LSi	ate	Zip Code	<del>,                                     </del>
Country	Telephor			(503) 684-3245
Name (Print/Type)	Paul X. Mondonsa/	Regist	ration No. (Attorney/Agent)	42,879 07/21/03
Signature	THAT IS MANUATION	-	. Date 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

55
3
2
3

## FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

(\$)	1,080.00
\ T /	*,000.00

Complete if Known					
Application Number					
Filing Date					
First Named Inventor	Thomas J. Holman				
Examiner Name					
Group/Art Unit					
Attorney Docket No.	42P15881				

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
Michael Dicastificant Disoney Dother Disone 3. ADE				FEES	S	
		Entity	ı Sma	II Entity		
L Deposit Account	Fee	Fee	Fee	Fee	-	
Deposit Account 02-2666	Code	(\$)	Code	(\$)	Fee Description Fee F	'aid
Account Number 02-2666	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Account Name Blakely, Sokoloff, Taylor & Zafman LLP	2053	130	2053	130	Non-English specification	[
The Commissioner is authorized to: check all that apply)	1812	2,520	1812		For filing a request for ex parte reexamination	_]
Credit any overpayments	1804	920*	1804	920 *	* Requesting publication of SIR prior to Examiner action	_
Charge any additional fee(s) required under 37 CFR §§ 1 16, 1.17, 1.18 and 1.20	4005	4.0404		4 040 *	· · · · · · · · · · · · · · · · · · ·	_[
☐ Charge fee(s) indicated below, except for the filling fee	1805	1,840*	1805	1,840	Requesting publication of SIR after Examiner action	
to the above-identified deposit account	1251	110	2251	55	Extension for reply within first month	[]
FEE CALCULATION	1252	410	2252	205	Extension for reply within second month	[
1. BASIC FILING FEE	1253	930	2253	465	Extension for reply within third month	- -
Large Entity   Small Entity	1254	1.450	2254	725	Extension for reply within fourth month	-
Fee Fee Fee Fee <u>Fee Description</u> Fee Paid Code (\$)	1255	1,970	2255	985	Extension for reply within fifth month	-
	1404	320	2401	. 160	Notice of Appeal	-
1001 750 2001 375 Utility filing fee 750.00	1402	320	2402	160	Filing a brief in support of an appeal	-
1002 330 2002 165 Design filing fee 1003 520 2003 260 Plant filing fee	1403	280	2403	140	Request for oral hearing	-
1004 750 2004 375 Reissue filing fee	1451	1,510	2451	1,510	Petition to institute a public use proceeding	[[
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive - unavoidable	-[]
	1453	1,300	2453	650	Petition to revive - unintentional	-
SUBTOTAL (1) (\$) 750.00	1501	1,300	2501	650	Utility issue fee (or reissue)	-  <sub> </sub>
2. EXTRA CLAIM FEES <sub>Extra</sub> Fee from	1502	470	2502	235	Design issue fee	7
Claims below Fee Paid	1503	630	2503	315	Plant issue fee	-[]
Total Claims 29 20* = 9 x 18.00 = \$162.00	1460	130	2460	130	Petitions to the Commissioner	-j
Independent 5 3 = 2 x 84.00 = \$168.00	1807	50	1807	50	Prosessing fee under 37 CFR 1.17(q)	
Multiple Dependent	1806	180	1806	180	Submission of Information Disclosure Stmt	-11
Large Entity   Small Entity	8021	40	8021	40	Recording each palent assignment per	
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	,				property (times number of properties)	_[]
1202 18 2202 9 Claims in excess of 20	1809	750	1809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1201 84 2201 42 Independent claims in excess of 3	1810	750	2810	375	For each additional invention to be	
1203 280 2203 140 Multiple Dependent claim, if not paid			[		examined (37 CFR § 1.129(b))	_[]
1204 84 2204 42 **Reissue independent claims over original	1801	750	2801		Request for Continued Examination (RCE)	_]]
patent	1802	900	1802	900	Request for expedited examination of a design application	
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent	Other fe	e (specify)				
SUBTOTAL (2) (\$) 330.00				_		
	* Reduce	d by Basic	Filing F	ee Paid	SUBTOTAL (3) (\$)	$\neg$
**or number previously paid, if greater, For Reissues, see below						
SUBMITTED BY Complete (if applicable)						

SUBMITTED B	Υ	Complete (if applicable)			
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone	(503) 684-6200
Signature	Harl A M moderate	•		Date	07/21/03